

VCDE Workspace Monthly Teleconference

Teleconference Information

Date: September 22, 2011

Time: 1:00 PM – 3:00 PM ET

Moderator: Brian Davis

Executive Summary

The meeting begun with reports from participants in the recent HL7 Work Group Meeting in San Diego, CA. Sherri DeCoronado introduced the NCI “Provocative Questions” list and web site.

Meeting Materials

- [Agenda](#)
- Reports from participants in the HL7 Work Group Meeting:
- NCI “Provocative Questions website
<http://provocativequestions.nci.nih.gov/>

Attendees

| First Name | Last Name | Affiliation |
|------------|-------------|----------------------------------|
| Charlie | Mead | 3 rd Millennium, Inc. |
| Xin | Zheng | Albert Einstein |
| Russell | Hamm | Apelon |
| Andrew | Buckler | BBMSC |
| Salvatore | Mungal | Duke University |
| Sherita | Alai | EMMES Corporation |
| Hua | Min | George Mason University |
| Mary | McAdams | IMS |
| Troy | Bleeker | Mayo Clinic Cancer Center |
| Harold | Solbrig | Mayo Clinic Cancer Center |
| Rick | Kiefer | Mayo Clinic Cancer Center |
| Dale | Suesse | Mayo Clinic Cancer Center |
| Michael | Riben | MD Anderson |
| Baris | Suzek | Medical Knowledge Engineers, LLC |
| Sherri | De Coronado | NCI CBIIT |
| Gilberto | Fragoso | NCI CBIIT |
| David | Hau | NCI CBIIT |
| Diane | Reeves | NCI CBIIT |
| Ed | Helton | NCI CBIIT |
| Denise | Warzel | NCI CBIIT |
| Larry | Wright | NCI CBIIT |
| John | Dzak | Northwestern University |

| First Name | Last Name | Affiliation |
|------------|-----------|-------------------------|
| Dong | Fu | Northwestern University |
| William | Stephens | Ohio State University |
| Virginia | Hetrick | Patient Advocate |
| Carolyn | Petersen | Patient Advocate |
| Mary | Cooper | SAIC |
| Tommie | Curtis | SAIC |
| Janice | Chilli | SAIC |
| Lisa | Schick | ScenPro |
| Trish | Wetzel | Stanford University |
| Roxanne | Martinez | TerpSys |
| Claire | Wolfe | TerpSys |
| Grace | Stafford | The Jackson Laboratory |
| Marty | Humphrey | University of Virginia |
| Mukesh | Sharma | Washington University |
| Jim | McCusker | Yale University |
| Larry | Brem | SAIC-Frederick |
| Brian | Davis | 3rd Millennium, Inc. |
| Aleksey | Kahn | Booz Allen Hamilton |
| Riki | Ohira | Booz Allen Hamilton |

MEETING NOTES

1. Reports from HL7 Work Group Meeting

- Brian Davis Report out Introduction (see [slides](#))
- HL7 provides multiple important, useful and used standards.
- HL7 Web site [here](#)
- HL7 Work groups list and links [here](#)
- Standards and Ballots:
 - 4 types: for comment, informative, DTSU , normative
 - Vote yes or no and comment
 - See more info [here](#)
- Collaborative approach like caBIG with workgroups
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- Charlie Mead report out: Chair of Architecture Review Board (no slides but see SAIF CD document [here](#))
 - HL7 Canonical SAIF: passed the “informative” ballot in May 2011, but was asked to address comments before the September meeting.
 - Currently producing the version for January “normative” ballot.
 - OASIS released a document on SOA three weeks prior on which they worked for 5 years. Hopefully HL7 and OASIS can harmonize the two documents.
 - Adoption: there are 4 adoption efforts: CBIIT, Australia, DoD, Canada. Also might be another one: Accenture is building for a national program.
 - Q: Virginia Hetrick: Where does VA stand at this point.

- Charlie: Don't know, but VA and DoD are having discussions; CBIIT is going to engage around open development initiative where SAIF IG will play role.
- Virginia: VA is able to access a phenomenal amount of data online and this is what a patient advocate would like to see.
- Architecture Review Board does not develop the SAIF IG, it can advise, but it is the responsibility: M&M group within HL7 is mostly responsible for it.
- Mukesh Sharma report out: clinical genomics work group (no slides but see Work group page [here](#))
 - Use case of clinical sequencing and its use in clinical care.
 - Number of key issues were identified:
 - Need have a gold standard sample when running a genome. Missing right now for different types of tumors and diseases.
 - Need software to resolve variations.
 - More FDA approved equipment for clinical use.
 - Good reporting tools that clinicians are comfortable using.
 - Need for sequence variation terms, looking at LOINC.
 - Sherri De Coronado: CBIIT is working on it – could look at CAP.
 - We need nextGen sequencing use cases.
 - **Action item:** please send your nextGen sequencing use cases to Mukesh.
- Diane Reeves, Clinical Interoperability Council report out (see [slides](#))
 - Tooling: Much of HL7 is difficult to use – need to develop standards that are easier to implement. Prioritize tool development as new vs. ongoing.
 - Workgroup score card: visual representations regarding how groups are doing in meetings, memberships, reports.
 - Clinical Interoperability Council: provides a bridge to the standards development framework, organizational process and forums for the clinical community.
 - Ballot Reconciliation: cardiology, preoperative anesthesiology, trauma data exchange
 - Tooling: Model Automated Exchange for UML Models
 - Diabetes Data Strategy draft white paper
 - Vocabulary: discussion on how to add clinical expert definitions of key concepts to LOINC and SNOMED.
 - Fresh Look: initiative from HL7 Board to look at new ways to use HL7 services.
 - Very popular. Need more open forums and closed sessions.
 - Clinical Modeling Initiative headed by Stan Huff
 - Q: Is this new look at modeling
 - Dave Hau: Stan Huff's CMI is a different activity than Resources for Health.
- Sal Mungal, Cardiac DAM report out (see [slides](#))
 - Stakeholders: Duke Cancer Research Institute, ACC, CDISC, FDA, NCI CBIIT, HL7 v3 messaging

- A very large effort initiated by the FDA. Harmonization of the data elements was coordinated by the ACC and DCRI.
- Went up for ballot at this session and passed. Got very constructive comments.
- Future Plans: CDISC.
- Q: Sherri: is anyone using the model or are they waiting for the official version to come out.
 - Sal: the people who will be using it immediately are the database people.
- Q: Sherri: are the same people going to be involved in ontology
 - Sal: they have to do a lot of work. Many cardiologists with their own methods. It may be 2 years out.
- Russ Hamm, report out IHTSDO Workbench and Terminology Tooling (no Slides but see Vocabulary page [here](#))
- Requirements:
 - Tooling has not been evolving at the same pace as the HL7 vocabulary.
 - IHTSDO Workbench has been used to maintain the SNOMED terminology.
 - HL7 and SNOMED have an agreement to align their tooling.
 - Q: Brian: what's the relationship between the workbench and the LexEVS and CTS2, esp. around value set management?
 - Russ: Mayo and IHTSDO have undertaken a project to create an implementation guide regarding how to represent SNOMED CT in CTS2 service.
 - HL7 recognizes that the workbench is not the only terminology tool and is trying to understand what other tools are available that can meet their needs.
- Harold Solbrig, report out CTS2 (no slides but see HL7 CTS2 wiki page [here](#)):
 - CTS2 was officially adopted in Object Management group.
 - Created implementation guide regarding how to represent SNOMED CT in CTS2 service.
 - PHAST project in France: similar to LexEVS. Functional requirements in CTS2 and use it to update Pharma to 80% hospitals in France.
 - Q: Brian: People on this call would probably be interested in seeing Kevin Peterson's (Mayo) presentation of the CTS2 framework: how to implement CTS2 service.
 - Harold: we would be happy to do it.
 - **Action Item:** Brian to follow up and schedule Harold's presentation at a future meeting.
- Ed Helton, RCRIM Workgroup
 - FDA has a more enhanced presence on RCRIM again and new RCRIM co-chair, Armando Allewa
 - Went through standard review of outstanding HL7 messages and spent time on RPF (product structure type document for global submission for drugs and biologics)
 - Spent time on ISO approval and BRIDG by Julie Evans (CDISC)
 - Joint meeting with Structured Documents and discussed use of HL7 standards for transport for submissions to FDA; CDISC content using HL7 V3 messages for study design and study participation.

- Robust discussion between committee and FDA about moving to greenCDA or other sponsored documents for submission to FDA
- Riki Ohira, Structured Documents Workgroup
 - Riki Ohira presented on some of the discussions and presentations at the HL7 meeting that were relevant to population sciences and public health, but not all the sessions were directly relevant to caBIG®.
 - Highlighted presentation by Daniel Pollock from the Centers for Disease Control (CDC) on use of HL7's Clinical Document Architecture (CDA) for reporting Healthcare-Associated Infections (HAIs)
 - Spent most of the time in the Structured Documents Workgroup and highlighted three main projects/discussions:
 - Consolidated CDA ballot reconciliation
 - Joint project with Public Health and Emergency Response (PHER) Workgroup to extend the Health Quality Measures Format (HQMF) for public health reporting requirements
 - Discussion with RCRIM about use of CDA R2 for clinical trials

2. NCI “Provocative Questions” web site – Sherri De Coronado (NCI CBIIT)

- Sherri De Coronado presented on an NCI initiative called “Provocative Questions” (<http://provocativequestions.nci.nih.gov/>)
- There were 24 questions NCI decided to release to the public and address, where people were allowed to rank the questions
- Comment: Virginia Hetrick commented that she cannot read the bulleted list for the “Provocative Questions” homepage in her browsers (Chrome and Firefox 3.6.2.2)
- There is a list of RFAs asking science research questions, but there could be semantic solutions to some of these RFAs
- Sherri suggested that the group could look at the questions and at least think about areas that could be relevant to VCDE or where a semantic solution could be recommended.

Next Meeting: Friday, October 7, 2011; 11:00 AM – 1:00 PM ET